Crosswalk Management System

Report CROSSWALK TO STATE

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Report Date 14-AUG-01 07:12

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Status: FN Substance Abuse and Mental Health Services Administration

Media ID: 1063 Office of Applied Studies

Start Date: 01-AUG-91

End Date : Follow-up :

Georgia's Treatment Episode Data Set

Version: 1

K = Ke	ey Field	System		<u>Georgia</u>
Item		Item		
No.	Treatment Episode Data Set		Value	State System Data
1	System Transaction Type	-	Transacti	on Type Added to Each Record
K 2	State Code	GA	FIPS Cod	e Added to Each Record
3	Reporting Date	-	Month an	nd Year of Submission Added to

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	version:

	Key Fiel	ld		Minimum					Georgi	
Item No.	Treatr	Treatment Episode Data Set		Iter	n	Val	ue	State System Data		
K 1	P	rovi	der ID	S1	,2,3	Faci	lity, Uı	nit, Subunit Numbers		
K 2	C	lien	t ID	S	4	МН	ID Nur	nber		
К 3			ependent/Collateral at ssion	-		Cod	epende	ent/Collateral Data Not Co	ollected	
	2		No			-	-			
K 4	C	lien	t Transaction Type	E-	5,20	-				
K 5	D	Date of Admission			5	Addition Date				
6	N	luml	per of Prior Treatments	S-	10	Nun	nber of	Prior Treatments		
	0		0			0	0			
	1		1			1	1			
	2		2			2	2			
	3		3			3	3			
	4		4			4	4			
	5		Or More			5	5 or	more		
	7		Unknown			7	Unk	nown		

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X = K tem	ey Field	Minim	um Item		<u>Geor</u>
No.	Treatmer	nt Episode Data Set		Valu	ie State System Data
7	Prin	cipal Source of Referral	B-29	Sour	ce of Referral In
	01	Individual (self)		01	Self
	01	Individual (self)		02	Family or Friend
	06	Other Community Referral		03	Clergy
	03	Other Health Care Provider		04	Private Practice Mental Health Professional
	03	Other Health Care Provider		05	Non-Psychiatric Physician
	03	Other Health Care Provider		06	State Mental Hospital
	03	Other Health Care Provider		07	State Mental Retardation Hospital
	02	Alcohol/Drug Abuse Provider		08	Division of MH/MR/SA Community Program
	03	Other Health Care Provider		09	Private Psychiatric Facility
	06	Other Community Referral		10	Division of Physical Health
	06	Other Community Referral		11	Division of Social Services
	06	Other Community Referral		12	Division of Vocational Rehabilitation
	07	Court/Criminal Justice/DUI/DWI		13	Division of Children and Youth
	07	Court/Criminal Justice/DUI/DWI		14	youth Development Center
	07	Court/Criminal Justice/DUI/DWI		15	Other Court/Law/Corrections Agency
	04	School (education)		16	School System
	06	Other Community Referral		17	Private Social or Community Agency
	03	Other Health Care Provider		18	Nursing Home
	03	Other Health Care Provider		19	Other Medical Facility
	97	Unknown		20	Other
8	Date of Birth		B-9	Birth	adate
9	Sex		B-20	Sex	
	2	Female		F	Female
	1	Male		M	Male

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Georgia's Treatment Episode Data Set Version: 1

٧	CISIOII	٠

Unknown

97

K = Key Field Item		N	Ainimum .			<u>Georg</u>
	Treatmen	t Episode Data Set	Item	Valu	e State System Data	
10	Race		B-21	Race/	Ethnic	
	03	Asian or Pacific Islander		A	Other Asian	
	04	Black		В	Black	
	13	Asian		C	Chinese	
	02	American Indian		I	American Indian	
	13	Asian		J	Japanese	
	20	Other		K	Cuban	
	20	Other		M	Mexican American	
	20	Other		O	Other	
	20	Other		P	Puetro Rican	
	05	White		W	White	
	23	Native Hawaiians or Other Pa Islanders	ncific			
11	Ethni	icity	B-21	Race/	Ethnic	
	05	Not of Hispanic Origin		A	Other Asian	
	05	Not of Hispanic Origin		В	Black	
	05	Not of Hispanic Origin		C	Chinese	
	05	Not of Hispanic Origin		I	American Indian	
	05	Not of Hispanic Origin		J	Japanese	
	03	Cuban		K	Cuban	
	02	Mexican		M	Mexican American	
	05	Not of Hispanic Origin		O	Other	
	01	Puerto Rican		P	Puerto Rican	
	05	Not of Hispanic Origin		W	White	

Unknown

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K = Key Field Item		Minimum Item			<u>Georgia</u>	
			item		e State System Data	
13	Emj	ployment Status	B-27	Empl	oyment Status	
	97	Unknown		-	Blank=Unknown	
	01	Full Time		1	Full Time	
	02	Part Time		2	Part Time	
	03	Unemployed		3	Job Training	
	04	Not in Labor Force		4	Unemployed - Under age 18	
	04	Not in Labor Force		5	Unemployed - Over age 64	
	04	Not in Labor Force		6	Unemployed - Mother with Chi Under age 6	ld
	04	Not in Labor Force		7	Unemployed - Disability	
	03	Unemployed		8	Unemployed - No job	

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Georgia's Treatment Episode Data Set Version: 1

		Mi n nt Episode Data Set	Minimum Item		<u>Geor</u>
		stance Problem Codes	S-20	Value State System Data Substance Problem Codes, Pri Secondary, Tertiary	
	01	None		0100 None	
	02	Alcohol		0201 Alcohol	
	03	Cocaine, Crack		0301 Crack	
	03	Cocaine, Crack		0302 Other Cocaine	
	04	Marijuana, Hashish, THC		0401 Marijuana/Hashish/THC	
	05	Heroin		0501 Heroin/Morphine	
	06	Non-Prescription Methadone		0601 Methadone	
	07	Other Opiates and Synthetics		0700 Other Opiates and Synth	etics
	07	Other Opiates and Synthetics		0701 Codeine	
	07	Other Opiates and Synthetics		0702 D-Proposyphene	
	07	Other Opiates and Synthetics		0703 Oxycodone	
	07	Other Opiates and Synthetics		0704 Meperidine HCL	
	07	Other Opiates and Synthetics		0705 Hydromorphone	
	07	Other Opiates and Synthetics		0706 Other Narcotic Analgesi	cs
	07	Other Opiates and Synthetics		0707 Pentazocine	
	08	PCP		0801 PCP or PCP Combination	ns
	09	Other Hallucinogens		0901 LSD	
	09	Other Hallucinogens		0902 Other Hallucinogens	
	10	Methamphetamines		1001 Methamphetamine/Speed	d
	11	Other Amphetamines		1100 Other Amphetamines	
	11	Other Amphetamines		1101 Amphetamine	
	11	Other Amphetamines		1102 Methylphenidate	
	12	Other Stimulants		1201 Other Stimulants	
	13	Benzodiazepines		1301 Alprazolam	
	13	Benzodiazepines		1302 Chlordiazepoxide	
	13	Benzodiazepines		1303 Clorzepate	
	13	Benzodiazepines		1304 Diazepam	
	13	Benzodiazepines		1305 Flurazepam	
	13	Benzodiazepines		1306 Lorazepam	
	13	Benzodiazepines		1307 Triazolam	
	13	Benzodiazepines		1308 Other Benzodiazepine	
		o.,			

1401 Meprobamate

Other Tranquilizers

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Georgia's Treatment Episode Data Set Version: 1

K = Key Field**Minimum** Georgia Item Item No. Treatment Episode Data Set Value State System Data 14 **Substance Problem Codes** S-20 Substance Problem Codes, Primary, Secondary, Tertiary Other Tranquilizers 14 1403 Other Tranquilizer 15 Barbiturates 1500 Barbiturates 15 Barbiturates 1501 Phenobarbital 15 Barbiturates 1502 Secobarbital/Amobarbital 15 **Barbiturates** 1503 Secobarbital Other Sedatives or Hypnotics 1601 Ethclorvynol 16 16 Other Sedatives or Hypnotics 1602 Glutethimide 16 Other Sedatives or Hypnotics 1603 Methaqualone 16 Other Sedatives or Hypnotics 1604 Other Non-Barbituate Sedatives 16 Other Sedatives or Hypnotics 1605 Other Sedatives 17 **Inhalants** 1701 Aerosols 17 **Inhalants** 1702 Nitrites 17 Inhalants 1703 Other Inhalants 17 Inhalants 1704 Solvents 17 Inhalants 1705 Anesthetics 1800 Over the Counter 18 Over-the-Counter 18 Over-the-Counter 1802 Diphenhydramine 20 Other 2001 Diphenylhydantiont Sodium 20 Other 2002 Other Drugs 9700 Unknown 97 Unknown

S-21

Usual Route of Administration

Cour	i Route of Hummistration	5 21	CBuu	Noute of Humin
01	Oral		01	Oral
02	Smoking		02	Smoking
03	Inhalation		03	Inhalation
04	Injection (IV or intramuscular)		04	Injection
20	Other		20	Other
97	Unknown		97	Unknown

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Usual Route of Administration

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K = Key Field Item No. Treatment		Minimum				<u>Georgia</u>
		nt Episode Data Set	Item	Val	ue State System Data	
16	Free	quency of Use	S-22	Freq Adm	ior to	
	01	No past month use		01	No Past Month Use	
	02	1-3 times in past month		02	1-3 Times in Past Month	
	03	1-2 times per week		03	1-2 Times per Week	
	04	3-6 times per week		04	3-6 Times per Week	
	05	Daily		05	Daily	
	97	Unknown		97	Unknown	
17		of First Use or Alcohol xication	S-23	Age	of First Use	
	00	Newborn with substance abuse problem		00	Newborn	
	00- 96	Range of Age		96	96 or Older	
	97	Unknown		97	Unknown	
K 18	Serv	Services		Add	ition and Release Modality	
	01	Hospital Inpatient		10	Hospital Inpatient (Acute Care	e)
	02	Free-standing Residential		21	Sub-Acute Detox Program	
	02	Free-standing Residential		22	24-Hour Emergency Receiving	7
	03	Hospital (other than detox)		30	-	
	04	Short-term, <=30 days		40	28-Day Program	
	04	Short-term, <=30 days		41	Transitional Shelter	
	05	Long-term, >30 days		51	Intensive Therapeutic Residen	ce (ITR)
	05	Long-term, >30 days		52	Sustained Recovery Residence	
	05	Long-term, >30 days		53	Recovery Residences	
	05	Long-term, >30 days		54	Adolescent Residential Center	s
	05	Long-term, >30 days		55	Halfway House	
	06	Intensive Outpatient		61	Day Treatment	
	06	Intensive Outpatient		62	Adolescent Day Treatment	
	07	Outpatient		70	Outpatient Services	
	08	Detoxification		80	Ambulatory Detoxification	

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K = Key	Field	M	inimum		<u>Georgia</u>
Item			Item		
No. Ti	reatme	ent Episode Data Set		Valı	ue State System Data
19		of Methadone Planned as Part atment	of S-11		of Methadone/Chemical Planned as of Treatment
	1	Yes		1	Yes - Methadone
	2	No		2	Yes - Other
	2	No		3	Drug free
	7	Unknown		7	Unknown

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K = K Item	X = Key Field		Optional				<u>Georgia</u>
No.	Treatme	ent Episode Data Set	Item	Va	lue	State System Data	
1	Detail Drug Code, Primary		S-20	Substance Problem Code			
2	Det	ail Drug Code, Secondary	S-20	Sub			
3	Det	ail Drug Code, Tertiary	S-20	Sub			
4		ostance Abuse Diagnosis Based M III-R Criteria	l on E-11	Primary Diagnosis			
5	Psy Alc	to E-12	Seconday Diagnosis				
	2	No		-	No)	
	7	Unknown		-	Un	ıknown	
6	Pre	gnant at Time of Admission	S-13	Pregnant at Time of Admi		at Time of Admission	
	1	Yes		1	Ye	es	
	2	No		2	No)	
	7	Unknown		7	Un	known	
7	Veteran Status		S-12	Vet	eran		
	1	Yes		1	Ye	es	
	2	No		2	No)	
	7	Unknown		7	Un	known	

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K = Key Field Item		Optio	nal Item		<u>Georgia</u>
No.	Treatment Episode Data Set		rtem	Val	ue State System Data
8	Liv	ing Arrangements	S-18		ng Arrangements
	01	Homeless		01	Homeless (Includes Shelters)
	02	Dependent Living		02	Dependent Living (Includes Halfway Houses)
	03	Independent Living		03	Independent Living
	97	Unknown		97	Unknown
9	Primary Source of Income or Support		S-15	Prin	nary Source of Income
	01	Wages/Salary		01	Wages/Salary
	02	Public Assistance		02	Public Assistance
	03	Retirement/Pension		03	Retirement/Pension
	04	Disability		04	Disability
	20	Other		20	Other
	21	None		21	None
	97	Unknown		97	Unknown
10	0 He	Health Insurance		Heal	th Insurance
	01	Private Insurance		01	Private Insurance
	02	Blue Cross/Blue Shield		02	Blue Cross/Blue Shield
	03	Medicare		03	Medicare
	04	Medicaid		04	Medicaid
	06	Health Maintenance Organization (HMO)		06	Health Maintenance Organization (HMO)
	20	Other		20	Other
	21	None		21	None
	97	Unknown		97	Unknown

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K = Key Field Item		eld	Ор	itional Item		<u>Geo</u>	<u>Georgia</u>
No.	Trea	tmen	t Episode Data Set	Item	Valu	e State System Data	
1		Expected Primary Source of Pay for This Treatment Episode		nt S-17	Expected Primary Source of Payment for This Treatment		
	01 02		Self-Pay		01	Self-pay	
			Blue Cross/Blue Shield		02	Blue Cross/Blue Shield	
	(03	Medicare Medicaid		03	Medicare	
	(04			04	Medicaid	
	(05	Other Government Payments		05	Other Government Payments	
	(06	Worker's Compensation		06	Worker's Compensation	
			Other Health Insurance Companies		07	Other Health Insurance Companies	es
	(80	No Charge		08	No Charge (Free, Charity, Special Research or Teachings)	
	(09	Other		09	Other	
	Ģ	97	Unknown		97	Unknown	
1	2 1	Detailed Not in Labor Force		B-26	Occuj	pation	
	9	97	Unknown		-	Unknown	
	9	98	Not Collected		1	White collar	
	9	98	Not Collected		2	Blue collar	
	9	98	Not Collected		3	Service worker	
	9	98	Not Collected		4	Farm worker	
	(01	Homemaker		5	Homemaker	
	(02	Student		6	Student	
	(03	Retired		7	Retired	
	(06	Other		8	Other	

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K = Key Field Item		Optional			<u>Georgia</u>
	reatme	nt Episode Data Set	Item	Valu	e State System Data
13		ailed Criminal Justice Referral egories	E-10	Comr	mitment Type
	01	State/Federal Court		201	Superior Court - Hold Order
	01	State/Federal Court		202	Superior Court - No Hold Order
	01	State/Federal Court		203	Juvenile Court - Hold Order
	01	State/Federal Court		204	Juvenile Court Order - Treatment
	01	State/Federal Court		205	Juvenile Court Order - Evaluation
	02	Formal Adjudication Process (other than above)		206	State Board of Corrections
	01	State/Federal Court		208	Court Order - Miscellaneous
	02	Formal Adjudication Process (other than above)		211	Admission to Evaluating Facility by Probate Court, Medical County
	02	Formal Adjudication Process (other than above)		212	Admission to Evaluating Facility by Request of PT. or Rep.
	02	Formal Adjudication Process (other than above)		213	Admission to Evaluating Facility After Hearing by Jurors, Judicial
	02	Formal Adjudication Process (other than above)		215	Judicial, Medico-Legal Committee (88-5)
	02	Formal Adjudication Process (other than above)		219	Admission to Evaluation Facility by Probate Court, Medical County
	02	Formal Adjudication Process (other than above)		220	Admission to Evaluating Facility by Request of Pt. or Rep, Judicial
	02	Formal Adjudication Process (other than above)		223	Judicial, Medico-Legal Committee (88-4)
	02	Formal Adjudication Process (other than above)		225	Continued Hospitalization Order, Probate Court (88-5)
	02	Formal Adjudication Process (other than above)		226	Continued Hospitalization Order, Probate Court (88-4)
	02	Formal Adjudication Process (other than above)		227	Continued Hospitalization Order, Hearing Officer (88-5)
	02	Formal Adjudication Process (other than above)		228	Continued Hopsitalization Order, Hearing Officer (88-4)
	02	Formal Adjudication Process (other than above)		229	Continued Convalescent Leave Order, Probate Court (88-5)
	02	Formal Adjudication Process (other than above)		230	Continued Convalescent Leave Order, Probate Court (88-4)
	02	Formal Adjudication Process (other than above)		231	Continued Convalescent Leave Order, Hearing Officer (88-5)
	02	Formal Adjudication Process		232	Continued Convalescent Leave Order,

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K = Key Field Item No. Treatmen		Opti				<u>Georgia</u>	
		t Episode Data Set	Item	Valı	ie	State System Data	
13		iled Criminal Justice Referral gories	E-10	Commitment Type			
	05	Diversionary Program/TASC		302	Cour	t Diversion	
	05	Diversionary Program/TASC		303	Pretr	ial Diversion	
	03	Probation/Parole		304	Civil	Probation	
	01	State/Federal Court		305	Civil	Commitment	
	03	Probation/Parole		306	Priso	on Release (Parole)	
	02	Formal Adjudication Process (other than above)		307	Man	dated Outpatient Treatment	
	01	State/Federal Court		308		ical Evaluation Team - Cour red Evaluation	t
14	4 Marital Status B-24		B-24	Marital Status			
	97	Unknown		-	Unkı	nown	
	02	Now Married or Cohabitating		1	Marı	ried	
	03	Separated (legally or otherwise absent)		2	Sepa	rated	
	04	Divorced		3	Divo	rced	
	05	Widowed		4	Wide	owed	
	01	Never Married		5	Neve	er Married	
15	Time	e Waiting to Enter Treatment	S-9	time	Waitii	ng to Enter Treatment	
	997	Unknown		997	Unkı	nown	

Crosswalk Management System REPORT CROSSWALK TO STATE

End of Report